



PTO/SB/83 (03-02)

Approved for use through 10/31/2002. OMB 0651-0035

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT**

Application Number	09/980,150
Filing Dat	08/05/2002
First Named Inventor	Gregory S. KELLER.
Group Art Unit	1615
Examiner Name	Not Yet Assigned
Attorney Docket Number	514072000100

To: Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313

I hereby apply to withdraw as attorney or agent for the above identified application.

This request to withdraw is being made at the request of the applicant.

1. ☐ The correspondence address is NOT affected by this withdrawal.
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- ☒ This request is made on behalf of myself and
☐ all attorneys/agents of record,
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
☒ the attorneys/agents associated with Customer Number 25225

This request is enclosed in triplicate.

Name Kate H. Murashige - Reg. No. 29,959

Signature *Kate H. Murashige*

Date October 24, 2003

NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date shown below.

Dated: 10/24/03 Signature: Matt Russell (Matt Russell)

SD-169883



image 1615

Please type a plus sign inside this box +

PTO/SB/21 (08-00)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/980,150	
	Filing Date	08/05/2002	
	First Named Inventor	Gregory S. KELLER	
	Group Art Unit	1615	
	Examiner Name	To be Assigned	
Total Number of Pages in This Submission	4	Attorney Docket Number	514072000100

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Request to Withdraw as Attorneys of Record (in triplicate); postcard
Remarks		Customer No. 25225

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Kate Murashige, Reg. No. 29,959 Morrison & Foerster LLP 3811 Valley Centre Drive, Suite 500, San Diego, CA 92130-2332
Signature	
Date	October 24, 2003

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Dated: 10/24/03	Signature: (Matt Russell)